

Volunteer and Employment Application

Today's Date: _____

PERSONAL INFORMATION						
Last Name		First		M.I.		
Street				Apartment/Unit #		
City		State		ZIP		
Phone			E-mail			
Date		Social Security		Date of Birth		
Position(s) Applying for:						
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Have you ever worked or volunteered for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?			
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain			

EDUCATION						
High School				Address		
From	To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College				Address		
From	To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Graduate				Address		
From	To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

REFERENCES

Please list two professional references and one personal reference

Full Name		Relationship	
Company		Phone	
Email Address			
Full Name		Relationship	
Company		Phone	
Email Address			
Full Name		Relationship	
Company		Phone	
Email Address			

Employment

Current Work Status	Employed FT <input type="checkbox"/> Employed PT <input type="checkbox"/> Student <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired <input type="checkbox"/> Homemaker <input type="checkbox"/>
Occupation	
Employer	

Availability

Monday	Specific Time
Morning 12am-12pm <input type="checkbox"/>	
Afternoon 12pm-5pm <input type="checkbox"/>	
Evening 5pm-12pm <input type="checkbox"/>	
Tuesday	Specific Time
Morning 12am-12pm <input type="checkbox"/>	
Afternoon 12pm-5pm <input type="checkbox"/>	
Evening 5pm-12pm <input type="checkbox"/>	
Wednesday	Specific Time
Morning 12am-12pm <input type="checkbox"/>	
Afternoon 12pm-5pm <input type="checkbox"/>	
Evening 5pm-12pm <input type="checkbox"/>	

Thursday	Specific Time
Morning 12am-12pm <input type="checkbox"/>	
Afternoon 12pm-5pm <input type="checkbox"/>	
Evening 5pm-12pm <input type="checkbox"/>	
Friday	Specific Time
Morning 12am-12pm <input type="checkbox"/>	
Afternoon 12pm-5pm <input type="checkbox"/>	
Evening 5pm-12pm <input type="checkbox"/>	
Saturday	Specific Time
Morning 12am-12pm <input type="checkbox"/>	
Afternoon 12pm-5pm <input type="checkbox"/>	
Evening 5pm-12pm <input type="checkbox"/>	
Sunday	Specific Time
Morning 12am-12pm <input type="checkbox"/>	
Afternoon 12pm-5pm <input type="checkbox"/>	
Evening 5pm-12pm <input type="checkbox"/>	

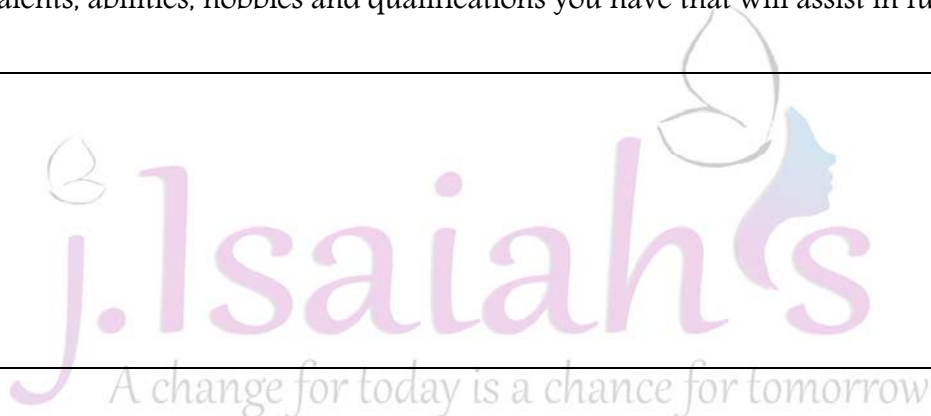
Volunteer/Work Interest	
What areas are you interested in volunteering/working? For detailed descriptions of positions visit www.jisiahs.org/careers	
<input type="checkbox"/> Counselor/Case Manager <input type="checkbox"/> Maintenance <input type="checkbox"/> Administrative Assistant <input type="checkbox"/> Security Guard <input type="checkbox"/> Nurse <input type="checkbox"/> Kitchen Staff <input type="checkbox"/> Fundraising	<input type="checkbox"/> Filing and Data Entry <input type="checkbox"/> IT (Technology) <input type="checkbox"/> Legal <input type="checkbox"/> Finance <input type="checkbox"/> Marketing <input type="checkbox"/> Program Planning <input type="checkbox"/> Board Member <input type="checkbox"/> Event Help

Previous Work/ Volunteer experience

Please describe any volunteer or work related experience you have had in relation to the position in which you are applying for.

Special Skills, Qualifications, and Hobbies

List all skills, talents, abilities, hobbies and qualifications you have that will assist in fulfilling duties at j. Isaiah's.



Applicant Statement

The information provided in this application is correct to the best of my knowledge. I authorize any reference listed above in the entirety of this application to give the Executive Director and/or staff of j. Isaiah's Community Collaboration Foundation, Inc. any information, including opinions they may have regarding my character and abilities to perform the duties for which I have applied. I release all references from any liability for furnishing such evaluations to the Executive Director and/or staff of j. Isaiah's Community Collaboration Foundation, Inc. Should my application be accepted, I agree to be bound by the policies of j. Isaiah's Community Collaboration Foundation, Inc., and will refrain from any activities that may conflict with their policies.

Applicant's Signature (last four of SSN)

Date

Ways to Submit your Application

1. Fill out on your computer, Save it to a file, and email to jiccf@jisaiahs.org
2. Fill out on your computer, Print, Mail to 4800 Whitesburg Dr. Ste 30-263 Huntsville, AL 35802